

Starkweather & Associates

IFW

Patent Trademark & Copyright Law

A Professional Corporation

9035 South 1300 East, Suite 200

Sandy, UT 84094

Tel: (801) 272-8368

Fax: (801) 748-1030

February 11, 2005

Carlos Kemeny

Daryl Reavis,

David Kemeny

Technical Consultants

Jonathan Irwin ††

†† Admitted in Utah
& Of Counsel

Michael W. Starkweather*

Jason P. Webb†

Gregory P. Gadson**

Registered Patent Attorneys

* Admitted in Wisconsin

† Admitted in Utah

** Admitted in Illinois & Massachusetts

Director of Patents

U. S. Patent and Trademark Office

P. O. Box 1450

Alexandria, VA 22313-1450

BEST AVAILABLE COPY

RE: Verification of Receipt & Processing of Documents
TOOL HOLDER AND METHOD
Serial Number: 10/648,581
Filing Date: 8/25/2003
Our File No.: 3158.2.2 NP

Dear Sir:

USPTO Examiner Robert Gibson brought to our attention during a telephone conversation today that the above-referenced application for David B. Udy still has the address and attorney as Garron B. Hobson at Thorpe, North and Western. A check of the application at your website confirmed his statement.

Enclosed are copies of the postcards returned from the USPTO verifying changes in the Attorney and Address, and an Assignment for this invention. I have also enclosed additional copies of the signed forms sent in to request the above changes.

Please verify to us that you have received the re-sent items, and also recorded these three changes in Mr. Udy's file.

Sincerely,

Diann Herring

Assistant to Michael Starkweather

/dh

Enclosures



PATENT
Docket No. 3158.2.2 NP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S) DAVID B. UDY

SERIAL NO.: 10/648,581

FILING DATE: 8/23/2003

TITLE: TOOL HOLDER AND METHOD

ATTY. DKT. NO.: 3158.2.2 NP

Director of the USPTO
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Dear Sir:

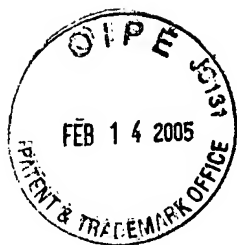
Enclosed herewith are the following documents:

- Copies of: Recordation Form Cover Sheet, Assignment, Check, Transmittal Letter, & Return Postcard regarding Assignment requested; as well as Returned Postcard from USPTO acknowledging receipt
- Copies of: Declaration and Power of Attorney, PTO/SB 82, Transmittal Letter, Return Postcard regarding Change of Address & New Power of Attorney; as well as Returned Postcard from USPTO acknowledging receipt
- Certificate of Mailing
- Acknowledgment Postcard

Respectfully submitted,

Michael W. Starkweather, Reg. No.: 34,441
9035 South 1300 East Suite 200
Sandy, Utah 84094

Dated: 2/11/05



PATENT APPLICATION
Docket No.: 3158.2.2 NP

CERTIFICATE OF MAILING

Date of Deposit: February 11, 2005

I hereby certify that these Copies of: Recordation Form Cover Sheet, Assignment, Check, Transmittal Letter, & Return Postcard regarding Assignment requested; as well as Returned Postcard from USPTO acknowledging receipt; and Copies of: Declaration and Power of Attorney, PTO/SB 82, Transmittal Letter, Return Postcard regarding Change of Address & New Power of Attorney; as well as Returned Postcard from USPTO acknowledging receipt, along with new Transmittal Letter and Return Postcard, are being deposited with the United States Postal Service Post Office by First Class mail to Addressee service under 37 C.F.R. § 1.8 on the date indicated above in an envelope addressed to Assistant Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

Respectfully submitted,

Meera Rajaram or Diann Herring
Assistant to Michael W. Starkweather

Date: 2/11/05
Starkweather & Associates
Michael W. Starkweather
9035 South 1300 East
Suite 200
Sandy, UT 84094
Te: 801-272-8638



DOCKET NO. 3158, 2-2 NP
SERIAL NO./USPN/REG. NO. 16/648,531
FILED/ISSUE/REG. 8/23/2003
APPLICANT: David B. Udy
ASSIGNEE/MARK: _____

The U.S. Patent & Trademark Office acknowledges and has stamped hereon the date of receipt of items checked below which were mailed 23 Dec 2004 **DOCKETED** 01-03-2005

- | | |
|---|---|
| <input type="checkbox"/> AFFIDAVIT | <input type="checkbox"/> COPY OF SIGNED FEE TRANSMITTAL |
| <input type="checkbox"/> AMENDMENT | <input type="checkbox"/> DECLARATION AND POWER OF ATTORNEY |
| <input type="checkbox"/> APPLICATION (____ PAGES) | <input type="checkbox"/> EXTENSION OF TIME: _____ MONTH(S) |
| <input type="checkbox"/> PATENT | <input type="checkbox"/> INFORMATION DISCLOSURE STATEMENT/FORM PTO 1449 |
| TOTAL CLAIMS _____ | <input type="checkbox"/> INITIAL INFO DATA SHEET |
| IND. CLAIMS _____ | <input type="checkbox"/> ISSUE FEE _____ COPIES |
| DWGS. _____ SHEET(S) _____ | <input type="checkbox"/> MAINTENANCE FEE _____ YR. |
| <input type="checkbox"/> PROVISIONAL | <input type="checkbox"/> REQUEST & CERTIFICATION FOR NON-PUBLICATION |
| <input type="checkbox"/> DESIGN | <input type="checkbox"/> RESPONSE TO OFFICE ACTION |
| <input type="checkbox"/> CONT. | <input type="checkbox"/> TRANSMITTAL TO PTO |
| <input type="checkbox"/> DIVISIONAL | <input type="checkbox"/> _____ |
| <input type="checkbox"/> RCE | <input type="checkbox"/> _____ |
| <input type="checkbox"/> APPLIC. TRANSMITTAL SHEET | <input type="checkbox"/> _____ |
| <input type="checkbox"/> ASSIGNMENT | <input type="checkbox"/> _____ |
| <input checked="" type="checkbox"/> COVER SHEET | <input type="checkbox"/> _____ |
| <input type="checkbox"/> FEE | <input type="checkbox"/> _____ |
| <input checked="" type="checkbox"/> CERTIFICATE OF MAILING | <input type="checkbox"/> _____ |
| CFR § <input type="checkbox"/> 1.8 <input type="checkbox"/> 1.10 (Express) | <input type="checkbox"/> _____ |
| <input type="checkbox"/> CHECK # <u>1560</u> IN THE AMOUNT OF \$ <u>40.00</u> | |

EXPRESS MAIL NO. _____
ATTORNEY MWS

STARKWEATHER & ASSOCIATES

9035 S 1300 E STE 200
SANDY, UT 84094
PH 801-272-8368

1560

31-5/12/00

DATE 23 December 2004

PAY TO THE ORDER OF

Director of the USPTO

\$ 40.00

Forty and 00/100

DOLLARS

ZIONS BANK

Zions First National Bank
Post Sandy Office 2039 East 9400 South
Sandy, Utah 84092
www.zionsbank.com

FOR David Vdy 3158.2.24

John L. Shwendeman

MP

⑈001560⑈ ⑆124000054⑆ 094 0064 8⑈



DOCKET NO.: 3158.2.24P
SERIAL NO./USPN/REG. NO. 16/649,541
FILED/ISSUE/REG. 8/23/2003
APPLICANT: David B. Vdy
ASSIGNEE/MARK: _____

The U.S. Patent & Trademark Office acknowledges and has stamped hereon the date of receipt of items checked below which were mailed

23 Dec 2004

- | | |
|---|--|
| <input type="checkbox"/> AFFIDAVIT | <input type="checkbox"/> COPY OF SIGNED FEE TRANSMITTAL |
| <input type="checkbox"/> AMENDMENT | <input type="checkbox"/> DECLARATION AND POWER OF ATTORNEY |
| <input type="checkbox"/> APPLICATION (____ PAGES) | <input type="checkbox"/> EXTENSION OF TIME |
| <input type="checkbox"/> PATENT | <input type="checkbox"/> INFORMATION DISCLOSURE |
| TOTAL CLAIMS _____ | <input type="checkbox"/> STATEMENT/FORM PTO 1449 |
| IND. CLAIMS _____ | <input type="checkbox"/> INITIAL INFO DATA SHEET |
| DWGS. _____ SHEET(S) _____ | <input type="checkbox"/> ISSUE FEE _____ COPIES _____ |
| <input type="checkbox"/> FIGURE(S) _____ | <input type="checkbox"/> MAINTENANCE FEE _____ YR. _____ |
| <input type="checkbox"/> PROVISIONAL | <input type="checkbox"/> REQUEST & CERTIFICATION |
| <input type="checkbox"/> DESIGN | <input type="checkbox"/> FOR NON-PUBLICATIONS |
| <input type="checkbox"/> CONT. | <input type="checkbox"/> RESPONSE TO OFFICE ACTION |
| <input type="checkbox"/> DIVISIONAL | <input type="checkbox"/> TRANSMITTAL TO PTO |
| <input type="checkbox"/> RCE | <input type="checkbox"/> _____ |
| <input type="checkbox"/> APPLIC. TRANSMITTAL SHEET | <input type="checkbox"/> _____ |
| <input type="checkbox"/> ASSIGNMENT | <input type="checkbox"/> _____ |
| <input checked="" type="checkbox"/> COVER SHEET | <input type="checkbox"/> _____ |
| <input type="checkbox"/> FEE | <input type="checkbox"/> _____ |
| <input checked="" type="checkbox"/> CERTIFICATE OF MAILING | <input type="checkbox"/> _____ |
| CPR \$ <input type="checkbox"/> 1.8 <input type="checkbox"/> 1.10 (Express) | <input type="checkbox"/> _____ |
| <input type="checkbox"/> CHECK # <u>1566</u> IN THE | <input type="checkbox"/> _____ |
| AMOUNT OF \$ <u>40.00</u> | <input type="checkbox"/> _____ |



PATENT
3158.2.2 NP

IN THE UNITED STATES

PATENT AND TRADEMARK OFFICE

APPLICANT(S): DAVID B. UDY

SERIAL NO.: 10/648,581

FILING DATE: August 25, 2003

TITLE: TOOL HOLDER AND METHOD

ATTY. DKT. NO.: 3158.2.2 NP

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Dated: 23 Dec 2004

By: Diann Herring

Meera Rajaram or Diann Herring

MAIL STOP ASSIGNMENT RECORDATION SERVICES
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

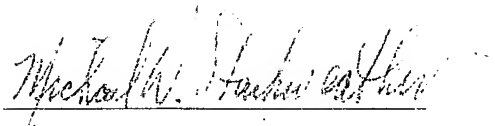
TRANSMITTAL LETTER

SIR:

Enclosed are:

- PTO-1595 Recordation Form Cover Sheet – Patents Only
- Assignment
- Acknowledgment Postcard
- Check No. _____ in the amount of \$40.00.

Respectfully submitted,

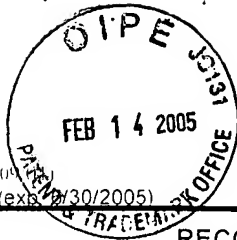
A handwritten signature in dark ink, appearing to read "Michael W. Starkweather", is written over a horizontal line.

Michael W. Starkweather, Reg. No.: 34.441

9035 South 1300 East, Suite 200

Sandy, Utah 84094.

Dated: 23 December 2004



RECORDATION FORM COVER SHEET
PATENTS ONLY

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)/Execution Date(s):

David B. Udy

Execution Date(s) _____

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance:

- ☒ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
☐ Government Interest Assignment
☐ Executive Order 9424, Confirmatory License
☐ Other _____

2. Name and address of receiving party(ies)

Name: HandiSolutions, inc.

Internal Address: Suite B 170

Street Address: 575 East 4500 South

City: Sandy

State: Utah

Country: USA Zip: 80107

Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application or patent number(s):

☐ This document is being filed together with a new application.

A. Patent Application No.(s)

10/648,581

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

5. Name and address to whom correspondence concerning document should be mailed:

Name: Starkweather & Associates

Internal Address: Suite 200

Street Address: 9035 South 1300 East

City: Sandy

State: Utah Zip: 84094

Phone Number: 801-272-8368

Fax Number: 801-748-1030

Email Address: mike@2patent.net

6. Total number of applications and patents involved:

1

7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00

- ☐ Authorized to be charged by credit card
☐ Authorized to be charged to deposit account
☒ Enclosed
☐ None required (government interest not affecting title)

8. Payment Information

a. Credit Card Last 4 Numbers _____
Expiration Date _____

b. Deposit Account Number _____

Authorized User Name _____

9. Signature:

Michael W. Starkweather
Signature

12/22/04
Date

Michael W. Starkweather

Name of Person Signing

Total number of pages including cover sheet, attachments, and documents:

2

ASSIGNMENT

Whereas, I

INVENTOR
AND CITY

(1) David B. Udy
County of Salt Lake

of Salt Lake City
and State of Utah

have invented certain improvements in

TOOL HOLDER AND METHOD

Application #10/648, 581

Filing Date: 08/25/2003

DATES THAT
INVENTOR
SIGNED THE
DECLARATION

and executed a United States patent application therefore on:

(1) 12-21-04

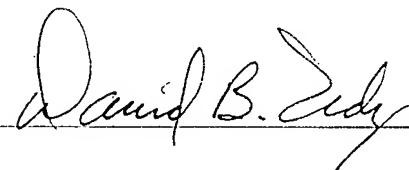
Whereas, HandiSolutions, Inc., a corporation of Utah, having a place of business at 575 East 4500 South, Suite B -170, Salt Lake City, Utah 84107 (hereinafter called HandiSolutions, Inc.), desires to acquire the entire right, title and interest in the said application and invention, and to any United States and foreign patents to be obtained therefore;

Now therefore, for a valuable consideration, receipt whereof is hereby acknowledged, I, the above named, hereby sell, assign, and transfer to HandiSolutions, Inc., its successors and assigns, the entire right, title and interest in the said application and invention therein disclosed for the United States and foreign countries, and all rights of priority resulting from the filing of said United States application, and I request the Commissioner of Patents to issue any Letters Patent granted upon the inventions set forth in said application to HandiSolutions, Inc., its successors and assigns; and I hereby agree that HandiSolutions, Inc. may apply for foreign Letters Patent on said invention and I will execute all papers necessary in connection with the United States and foreign applications when called upon to do so by HandiSolutions, Inc.

Signed and sealed

CITY
DATE

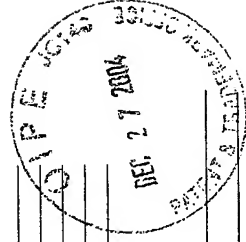
(1) at Salt Lake City
on 12-21-04

 SIGNATURE
OF INVENTOR

DOCKET NO.: 3158, 2.2 NP
SERIAL NO./USPN/REG. NO.: 10/648, 581
FILED/ISSUE/REG.: 8/25/2003
APPLICANT: David P. Maly
ASSIGNEE/MARK: Handi-Solutions, Inc.

The U.S. Patent & Trademark Office acknowledges and has stamped hereon the date of receipt of items checked below which were mailed 23 Dec 2004 01-03-2005

- | | |
|--|--|
| <input type="checkbox"/> AFFIDAVIT | <input type="checkbox"/> COPY OF SIGNED FEE TRANSMITTAL |
| <input type="checkbox"/> AMENDMENT | <input checked="" type="checkbox"/> DECLARATION AND POWER OF ATTORNEY |
| <input type="checkbox"/> APPLICATION(____) PAGES) | <input type="checkbox"/> EXTENSION OF TIME _____ MONTH(S) |
| <input type="checkbox"/> PATENT | <input type="checkbox"/> INFORMATION DISCLOSURE STATEMENT/FORM PTO 1449 |
| TOTAL CLAIMS _____ | <input type="checkbox"/> INITIAL INFO DATA SHEET |
| IND. CLAIMS _____ | <input type="checkbox"/> ISSUE FEE _____ COPIES |
| DWGS. _____ SHEET(S) _____ | <input type="checkbox"/> MAINTENANCE FEE _____ YR. |
| FIGURE(S) _____ | <input type="checkbox"/> REQUEST & CERTIFICATION FOR NON-PUBLICATION |
| <input type="checkbox"/> PROVISIONAL | <input type="checkbox"/> RESPONSE TO OFFICE ACTION |
| <input type="checkbox"/> DESIGN | <input type="checkbox"/> TRANSMITTAL TO PTO |
| <input type="checkbox"/> CONT. | <input checked="" type="checkbox"/> <u>5 B/82</u> |
| <input type="checkbox"/> DIVISIONAL | <input type="checkbox"/> COVER SHEET |
| <input type="checkbox"/> RCE | <input type="checkbox"/> FEE |
| <input type="checkbox"/> APPLIC. TRANSMITTAL SHEET | <input checked="" type="checkbox"/> CERTIFICATE OF MAILING <u>as per</u> |
| <input type="checkbox"/> ASSIGNMENT | CFR § 1.8 <input type="checkbox"/> 1.10 (Express) |
| | <input type="checkbox"/> CHECK # _____ IN THE |
| | AMOUNT OF \$ _____ |



EXPRESS MAIL NO. MUS
ATTORNEY

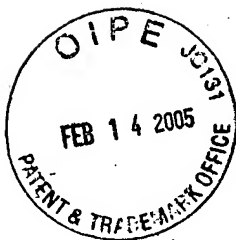
DOCKET NO.: 3158, 2.2 NP
SERIAL NO./USPN/REG. NO. 10/648, 581
FILED/ISSUE/REG.: 8/25/2003
APPLICANT: David B. Ude
ASSIGNEE/MARK: Handi Solutions, Inc.

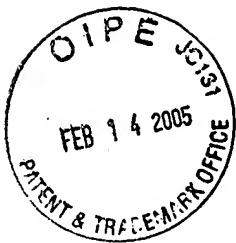
The U.S. Patent & Trademark Office acknowledges and has stamped hereon the date of receipt of items checked below which were mailed

23 Dec 2004

☐ AFFIDAVIT
☐ AMENDMENT
☐ APPLICATION (PAGES)
☐ PATENT
TOTAL CLAIMS
IND. CLAIMS
DWGS. SHEET(S)
FIGURE(S)
☐ PROVISIONAL
☐ DESIGN
☐ CONT.
☐ DIVISIONAL
☐ RCE
☐ APPLIC. TRANSMITTAL SHEET
☐ ASSIGNMENT
☐ COVER SHEET
☐ FEE
☒ CERTIFICATE OF MAILING
CFR § 1.8 ☐ 1.10 (Express)
☐ CHECK # IN THE
AMOUNT OF \$
☐ COPY OF SIGNED FEE TRANSMITTAL
☒ DECLARATION AND POWER
OF ATTORNEY
☐ EXTENSION OF TIME
MONTH(S)
☐ INFORMATION DISCLOSURE
STATEMENT/FORM PTO 1449
☐ INITIAL INFO DATA SHEET
☐ ISSUE FEE COPIES
☐ MAINTENANCE FEE YR.
☐ REQUEST & CERTIFICATION
FOR NON-PUBLICATION
☐ RESPONSE TO OFFICE ACTION
☒ TRANSMITTAL TO PTO
5/8/02

EXPRESS MAIL NO. 1765
ATTORNEY





PATENT
3158.2.2 NP

IN THE UNITED STATES

PATENT AND TRADEMARK OFFICE

APPLICANT(S): DAVID B. UDY

SERIAL NO.: 10/648,581

FILING DATE: August 25, 2003

TITLE: TOOL HOLDER AND METHOD

ATTY. DKT. NO.: 3158.2.2 NP

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

Dated: 23 Dec 2004

By: Diann Herring

Meera Rajaram or Diann Herring

COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

TRANSMITTAL LETTER

SIR:

Enclosed are:

- Declaration and Power of Attorney for Patent Application
- PTO/SB/82 Revocation..and New Power of Attorney...and Change of Address
- Acknowledgment Postcard

Respectfully submitted,

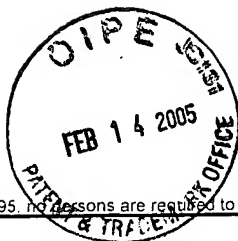
A handwritten signature in cursive script, reading "Michael W. Starkweather". The signature is written in dark ink and is positioned above a horizontal line.

Michael W. Starkweather, Reg. No.: 34,441

9035 South 1300 East, Suite 200

Sandy, Utah 84094

Dated: 23 December 2004



PTO/SB/82 (09-04)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS.**

Application Number	10/648,581
Filing Date	August 25, 2003
First Named Inventor	David B. Udy
Art Unit	3728
Examiner Name	Unkonwn
Attorney Docket Number	3158.2.2NP

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Starkweather & Associates				
Address	9035 South 1300 East Suite 200				
City	Sandy	State	Utah	Zip	84094
Country	USA				
Telephone	801-272-8368	Fax	801-748-1030		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	David B. Udy		
Date	12-21-04	Telephone	801-265-9700

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Docket No.:3158.2.2NP

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence and citizenship are as stated below next to my name;

I believe I am the original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

TOOL HOLDER AND METHOD

the specification of which (check one)

_____ is attached hereto.
_____ was filed on 08/25/2003
as Application Serial No. 10/648,581
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

<u>none</u>			<u>Yes</u> <u>No</u>
(Number)	(Country)	(Day/Month/Year filed)	Priority Claimed

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56, which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

<u>60/406,083</u>	<u>08/26/2002</u>	
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As named inventor, I hereby appoint the following attorneys and agents to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Michael W. Starkweather Reg. No.: 34,441

Michael S. King Reg. No.: 51,885

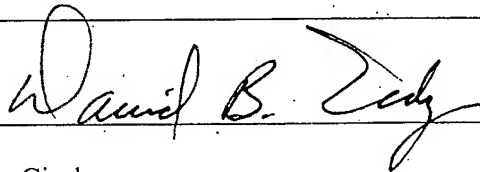
Jason P. Webb Reg. No.: 55,714

Send correspondence to:

Starkweather & Associates
9034 South 1300 East, Suite 200
Sandy, Ut 84094
Telephone: (801) 272-8368

Full name of sole or first joint-inventor: David B. Udy

Inventor's signature:



Date:

12-21-04

Residence: 1235 Sandra Circle
Salt Lake City, Utah 84107

Citizenship: United States of America

Post Office Address: Same

**This Page is Inserted by IFW Indexing and Scanning
Operations and is not part of the Official Record**

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- ☐ **BLACK BORDERS**
- ☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- ☐ **FADED TEXT OR DRAWING**
- ☐ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- ☐ **SKEWED/SLANTED IMAGES**
- ☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- ☐ **GRAY SCALE DOCUMENTS**
- ☐ **LINES OR MARKS ON ORIGINAL DOCUMENT**
- ☐ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- ☐ **OTHER:** _____

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.